

SCC eFile	2013 ANNUAL REPORT COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION	213521055					
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p>1.) CORPORATION NAME: Preservation Northern Neck and Middle Peninsula, Inc.</p> <p>2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: EDWARD J WHITE 520 KINSALE RD PO BOX 207</p> <p>KINSALE, VA</p> <p>3.) CITY OR COUNTY OF VA REGISTERED OFFICE: WESTMORELAND COUNTY</p> <p>4.) STATE OR COUNTRY OF INCORPORATION: VA</p> </div> <div style="width: 35%;"> <p>DUE DATE: 6/30/2013</p> <p>SCC ID NO: 07522006</p> <p>5.) STOCK INFORMATION</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">CLASS</td> <td style="width: 50%;">AUTHORIZED</td> </tr> </table> </div> </div>			CLASS	AUTHORIZED			
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<p>6.) PRINCIPAL OFFICE ADDRESS:</p> <p style="margin-left: 40px;">ADDRESS: 520 KINSALE RD PO BOX 207</p> <p style="margin-left: 40px;">CITY/ST/ZIP: KINSALE, VA 22488</p>							
<p>7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.</p>							
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top;"> NAME: THOMAS WOLF TITLE: DIRECTOR ADDRESS: 3121 45TH ST NW CITY/ST/ZIP/CO: WASHINGTON, DC 20016 </td> <td style="width: 5%; text-align: center; vertical-align: middle;"> <input type="checkbox"/> </td> <td style="width: 40%; text-align: center; vertical-align: middle;"> OFFICER </td> <td style="width: 5%; text-align: center; vertical-align: middle;"> <input checked="" type="checkbox"/> </td> <td style="width: 40%; text-align: center; vertical-align: middle;"> DIRECTOR </td> </tr> </table>			NAME: THOMAS WOLF TITLE: DIRECTOR ADDRESS: 3121 45TH ST NW CITY/ST/ZIP/CO: WASHINGTON, DC 20016	<input type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
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NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Becky Marks DIRECTOR P. O. Box 5 Sharps, VA 22548	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	John Feuerstein DIRECTOR 1547 Drum Bay Road Hague, VA 22469	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Sandy Garretson DIRECTOR 2494 Simonson Road Farnham, VA 22460	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Christopher Agnew DIRECTOR 12433 Richards Ridge Road King George, VA 22485	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Robert McKenney DIRECTOR 50 Fox Trail South Irvington, VA 22480	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Gwynne Tayloe DIRECTOR 361 Mill Pond Road Warsaw, VA 22752	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Marilyn South DIRECTOR 987 Mill Wharf Road Wake, VA 23176	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.			
/s/ Edward JamesWhite		Edward JamesWhite,	5/1/2013
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT		PRINTED NAME AND CORPORATE TITLE	DATE
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.			